| CITY OF BALTIMORE WET W<br>SMOKE AND DYED WA   | Page _1_ of 2   |   |  |  |  |  |  |  |
|--|---|---|--|--|--|--|--|--|
| Sewershed: JONES FALLS 994   | Company: ADS  | Date: 7-25-08                                   |  |  |  |  |  |  |
| Test to be Performed:  Smoke:X Dyed Water:   | Ground Condition:  Dry:X Damp: Wet:                             | Supervisor:TM                                   |  |  |  |  |  |  |
| Manhole ID: S31KK1011MH  | Test ID: 052  | Notifications Made:X_<br>(Residents, Fire, 311) |  |  |  |  |  |  |
| Field Sketch: (Show All Manholes with Numbers, Blower Placement Location, Sandbag or Isolation Locations, Street Names, Building Addresses and Locations, Defect Locations and Photograph Numbers) |   |   |  |  |  |  |  |  |
| BLOWER 31 KK1 011  Sandbag  108  SR  000m  109  115  005m  115   | 260 /1  101  102  103  4310  104  105  106  107  107  108  4306 | Sandbag  013m  8°  13  4311  BLOWER  31KK1 019  |  |  |  |  |  |  |

023m

012m

017m

008m

024m

| CITY OF BALTIMORE WET WEATHER CONSENT DECREE<br>SMOKE AND DYED WATER TESTING FORM   |                   |                   |             |                    |          | Page2_ of 2            |                  |          |              |
|---|-------------------|-------------------|-------------|--------------------|----------|------------------------|------------------|----------|--------------|
| Sewershed:Jones Falls #994  |                   |                   | Company:ADS |                    |          | Date:7-25-08           |                  |          |              |
| Test to be Performed:   |                   | Ground Condition: |             |                    |          | Supervisor:TM_         |                  |          |              |
| Smoke:X Dyed Water:   |                   | Dry:X Damp: Wet:  |             |                    |          | Notifications Made:X   |                  |          |              |
| Manhole ID: S31KK1011MH   |                   | Test ID:052       |             |                    |          | (Residents, Fire, 311) |                  |          |              |
| <b>Field Sketch:</b> (Show all Manholes with Numbers, Blower Placement Location, Sandbag or Isolation Locations, Street Names, Building Addresses and Locations, Defect Locations and Photograph Numbers) |                   |                   |             |                    |          |                        |                  |          |              |
| Defect<br>No.   |                   | Address           |             | Source<br>Type     | Location | Sector                 | Drainage<br>Area | Severity | Photo Number |
|   |                   |                   |             |                    |          |                        |                  |          |              |
|   |                   |                   |             |                    |          |                        |                  |          |              |
|   |                   |                   |             |                    |          |                        |                  |          |              |
|   |                   |                   |             |                    |          |                        |                  |          |              |
|   |                   |                   |             |                    |          |                        |                  |          |              |
|   |                   |                   |             |                    |          |                        |                  |          |              |
|   |                   |                   |             |                    |          |                        |                  |          |              |
|   |                   |                   |             |                    |          |                        |                  |          |              |
|   |                   |                   |             |                    |          |                        |                  |          |              |
|   |                   |                   |             |                    |          |                        |                  |          |              |
|   |                   |                   |             |                    |          |                        |                  |          |              |
|   |                   |                   |             |                    |          |                        |                  |          |              |
|   |                   |                   |             |                    |          |                        |                  |          |              |
|   |                   |                   |             |                    |          |                        |                  |          |              |
|   |                   |                   |             |                    |          |                        |                  |          |              |
|   |                   |                   |             |                    |          |                        |                  |          |              |
|   |                   |                   |             |                    |          |                        |                  |          |              |
|   |                   |                   |             |                    |          |                        |                  |          |              |
|   |                   |                   |             |                    |          |                        |                  |          |              |
|   |                   |                   |             |                    |          |                        |                  |          |              |
|   |                   |                   |             |                    |          |                        |                  |          |              |
|   |                   |                   |             | ODOEDV             | (ATION   | CODEC                  |                  |          |              |
|   | Source Type       | Location          | Sector      | OBSERV<br>Severity | ATION    | CODES Source Type      | Location         |          |              |
| 01  | Main Sewer        | Paved Concrete    | Public      | No Smoke           | 10       |                        | Non-Paved        |          |              |
|   | Service Line      |                   | Private     | Trace              |          | Storm Drain            | Field/Woods      |          |              |
|   | Cleanout          | Paved Other       |             | Moderate           |          |                        | Alley            |          |              |
|   | Downspout         | Driveway          |             | Major              |          | Storm Manhole          | Golf Course      |          |              |
|   | Area Drain        | Sidewalk          |             |                    | 14       | Storm Ditch            | Other            |          |              |
| 06  | Driveway Drain    | Curb              |             |                    | 15       | Excavation             |                  |          |              |
| 07  | Stairwell Drain   | Yard- Front       |             |                    | 16       | Other                  |                  |          |              |
| 80  | Foundation Drain  | Yard-Back         |             |                    |          |                        |                  |          |              |
| 09  | Building Interior | Yard- Side        |             |                    |          |                        |                  |          |              |

Comments

<sup>1</sup> No Defects found